



pennsylvania

DEPARTMENT OF HUMAN SERVICES

Office of Developmental Programs
Bureau of Autism Services

ADULT AUTISM WAIVER

Quality Assurance Data

**State Fiscal Years 2011-2012, 2012-2013,
2013-2014, 2014-2015, 2015-2016**

Contents

| | |
|--|---|
| I. STATE CONDUCTS LEVEL OF CARE DETERMINATIONS CONSISTENT WITH THE NEED FOR INSTITUTIONALIZATION (LOC) | 3 |
| II. SERVICE PLANS ARE RESPONSIVE TO WAIVER PARTICIPANT NEEDS (ISP) | 4 |
| III. QUALIFIED PROVIDERS SERVE WAIVER PARTICIPANTS (QP) | 5 |
| IV. HEALTH AND WELFARE OF WAIVER PARTICIPANTS (HW)..... | 7 |
| V. STATE MEDICAID AGENCY RETAINS ADMINISTRATIVE AUTHORITY OVER THE WAIVER PROGRAM (AA)..... | 9 |
| VI. STATE PROVIDES FINANCIAL ACCOUNTABILITY FOR THE WAIVER (FA)..... | 9 |

PA’s ADULT AUTISM WAIVER ANNUAL QUALITY ASSURANCE DATA State Fiscal Years 2011-2012, 2012-2013, 2013-2014, 2014-2015, 2015-2016

Pennsylvania’s Adult Autism Waiver (AAW) is a statewide, person-centered program. It is administered by the Bureau of Autism Services (BAS), within the PA Department of Human Services’ Office of Developmental Programs to provide home and community-based services (HCBS) designed to help adults with autism live in their communities with the necessary supports, based on their identified goals and needs. The AAW is a Medicaid program jointly funded by the Commonwealth of Pennsylvania and the Federal Centers for Medicare and Medicaid Services (CMS), a branch of the US Department of Health and Human Services.

CMS requires states to provide a description of every waiver’s Quality Management Strategy (QMS) as part of a waiver application. A QMS is an ongoing process that measures performance in a number of areas such as assuring a participant’s rights are protected. The data in this report details how BAS performed for each of the six assurances specified in Section 1915(c) of the Social Security Act, the law that authorizes HCBS waivers, over the course of five fiscal years; each fiscal year begins on July 1 and ends on June 30 the following year. This data can be cross-referenced to the quality review report conducted by CMS (for years 2011-2012, 2012-2013 and 2013-2014) and the AAW’s annual Quality Assurance Reports (for years 2014-2015 and 2015-2016).

The complete text of the current AAW and the reports mentioned above are available at www.dhs.pa.gov/citizens/autismservices/adultautismwaiver.

I. STATE CONDUCTS LEVEL OF CARE DETERMINATIONS CONSISTENT WITH THE NEED FOR INSTITUTIONALIZATION (LOC)

CMS Assurance: “The State demonstrates that it implements the processes and instrument(s) specified in its approved waiver for evaluating/re-evaluating an applicant's/waiver participant's level of care consistent with care provided in a hospital, NF [Nursing Facility], or ICF/ID-DD [Intermediate Care Facility for Intellectual or Developmental Disabilities].”

| AAW Performance Measure LOC1: Number of applicants who receive a level of care determination within 60 days of BAS receipt of application divided by total number of applicants. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Applicants who received LOC within 60 days</i> <i>Denominator (D) = Applicants returning LOC determination</i> <i>Data Source: Participant Tracking Database</i> | N | 17 | 16 | 137 | 113 | 42 |
| | D | 30 | 32 | 139 | 118 | 43 |
| | % (N/D) | 57% | 50% | 99% | 96% | 98% |

| AAW Performance Measure LOC2: Number of enrolled participants who receive a level of care re-evaluation within 12 months of previous evaluation divided by number of participants who have been enrolled for at least 12 months. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Enrolled participants who received LOC within 365 days</i> <i>Denominator (D) = Participants enrolled for at least 12 months</i> <i>Data Source: Participant Tracking Database</i> | N | 198 | 219 | 245 | 326 | 443 |
| | D | 250 | 269 | 293 | 393 | 498 |
| | % (N/D) | 79% | 81% | 84% | 83% | 89% |

| AAW Performance Measure LOC3: Number of initial level of care determinations where the instrument described in Appendix B-6 is used and BAS agrees with the decision divided by the number of initial level of care determinations reviewed by BAS. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Initial LOC determinations in compliance</i> <i>Denominator (D) = Initial LOC determinations</i> <i>Data Source: BAS review of MA-51 forms</i> | N | 30 | 32 | 139 | 118 | 43 |
| | D | 30 | 32 | 139 | 118 | 43 |
| | % (N/D) | 100% | 100% | 100% | 100% | 100% |

| AAW Performance Measure LOC4: Number of level of care re-determinations where the instrument described in Appendix B-6 is used and BAS agrees with the decision divided by total number of level of care re-determinations. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = LOC redeterminations in compliance</i> <i>Denominator (D) = LOC redeterminations</i> <i>Data Source: BAS review of MA-51 forms</i> | N | 250 | 269 | 293 | 393 | 498 |
| | D | 250 | 269 | 293 | 393 | 498 |
| | % (N/D) | 100% | 100% | 100% | 100% | 100% |

II. SERVICE PLANS ARE RESPONSIVE TO WAIVER PARTICIPANT NEEDS (ISP)

CMS Assurance: “The state demonstrates it has designed and implemented an effective system for reviewing the adequacy of service plans for waiver participants.”

| AAW Performance Measure SP1: Number of Individual Support Plans (ISP) that address the participant’s needs and goals identified in the assessments divided by total number of ISPs. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = ISPs that address the participant’s needs and goals</i> <i>Denominator (D) = Total ISPs</i> Data Source: BAS review of ISPs | N | 250 | 269 | 293 | 393 | 537 |
| | D | 250 | 269 | 293 | 393 | 537 |
| | % (N/D) | 100% | 100% | 100% | 100% | 100% |

| AAW Performance Measure SP2: Number of ISPs in which the ISP is approved without revisions, which indicates the service planning process in Appendix D was followed, divided by total number of ISPs. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = ISPs approved without revisions</i> <i>Denominator (D) = Approved ISPs</i> Data Source: HCSIS | N | 240 | 256 | 333 | 411 | 473 |
| | D | 280 | 301 | 406 | 501 | 537 |
| | % (N/D) | 86% | 85% | 82% | 82% | 88% |

| AAW Performance Measure SP3: Number of initial ISPs completed within 45 days of the selection of an SC agency divided by total number of initial ISPs completed during a quarter. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Initial ISPs completed within 45 days</i> <i>Denominator (D) = Initial ISPs</i> Data Source: Participant Tracking Database | N | 16 | 10 | 62 | 81 | 38 |
| | D | 30 | 32 | 113 | 108 | 43 |
| | % (N/D) | 53% | 31% | 55% | 75% | 88% |

| AAW Performance Measure SP4: Number of ISPs for which revisions were completed within 12 months of most recent previous ISP divided by total number of ISPs for which a revision was due in a quarter. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = ISPs revised within 12 months of previous ISP</i> <i>Denominator (D) = Participants enrolled for at least 12 months</i> Data Source: HCSIS ISP Monitoring Report | N | 249 | 266 | 291 | 393 | 498 |
| | D | 250 | 269 | 293 | 393 | 498 |
| | % (N/D) | 99% | 99% | 99% | 100% | 100% |

| | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure SP5: Number of participant interview respondents who reported unmet needs divided by number of participants interviewed by BAS staff (a number above zero indicates the assurance is not met for some individuals). | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Participants who reported unmet needs</i> <i>Denominator (D) = Participants interviewed who answered this question</i> Data Source: Participant Interviews | N | 3 | 1 | 0 | 3 |
| | D | 49 | 53 | 51 | 58 |
| | % (N/D) | 6% | 2% | 0% | 5% |

| | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure SP6: Number of participants with at least one unit of service that was authorized and not used, where unused services is not explained by participant illness; hospitalization; participant refusing services; or participant vacation with family or friends divided by number of participants interviewed by BAS (a number above zero indicates the assurance is not met for some individuals). | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Participants who reported unused service due to reasons beyond those listed in the performance measure</i> <i>Denominator (D) = Participants interviewed who answered this question</i> Data Source: Participant Interviews | N | 11 | 9 | 8 | 11 |
| | D | 51 | 48 | 54 | 58 |
| | % (N/D) | 22% | 19% | 15% | 19% |

| | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure SP7: Number of participants who indicated they were able to choose between a) waiver and institutional care and b) among waiver services and providers are documented divided by number of participants interviewed by BAS staff. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = People for whom choice between waiver and institutional care is documented</i> <i>Denominator (D) = Participants selected for monitoring sample</i> Data Source: Review of BAS files | N | 53 | 55 | 55 | 54 |
| | D | 54 | 56 | 56 | 58 |
| | % (N/D) | 98% | 98% | 98% | 93% |

III. QUALIFIED PROVIDERS SERVE WAIVER PARTICIPANTS (QP)

CMS Assurance: “The state demonstrates that it has designed and implemented an adequate system for assuring that all waiver services are provided by qualified providers.”

| | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure QP1: Number of providers with a current license divided by total number of providers enrolled for services that require a license (i.e., day habilitation, residential habilitation, occupational therapy, speech/language therapy, family counseling, and nutritional consultation). | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Enrolled and licensed providers in compliance</i> <i>Denominator (D) = Enrolled providers requiring a license</i> Data Source: BAS review of MA-51 forms | N | 92 | 112 | 147 | 115 |
| | D | 92 | 112 | 147 | 115 |
| | % (N/D) | 100% | 100% | 100% | 100% |

| AAW Performance Measure QP2: Number of providers with a Medical Assistance Provider Agreement and an AAW Supplemental Agreement divided by number of providers enrolled in the AAW. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Enrolled providers in compliance</i> <i>Denominator (D) = Enrolled providers</i> Data Source: BAS review of MA-51 forms | N | 458 | 573 | 741 | 878 | 996 |
| | D | 458 | 573 | 741 | 878 | 996 |
| | % (N/D) | 100% | 100% | 100% | 100% | 100% |

| AAW Performance Measure QP3: Number of direct support staff who meet age, education, and experience requirements in the AAW/Appendix C-3 divided by number of direct support staff serving AAW participants in a given month. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Direct support staff in compliance</i> <i>Denominator (D) = Direct support staff personnel files reviewed</i> Data Source: On-site record review of provider personnel data | N | 150 | 126 | 178 | 198 | 205 |
| | D | 151 | 126 | 178 | 200 | 209 |
| | % (N/D) | 99% | 100% | 100% | 99% | 98% |

| AAW Performance Measure QP4: Number of direct support staff for whom criminal background checks have been completed divided by number of direct support staff serving AAW participants in a given month. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Direct support staff in compliance</i> <i>Denominator (D) = Direct support staff personnel files reviewed</i> Data Source: On-site record review of provider personnel data | N | 151 | 125 | 177 | 200 | 209 |
| | D | 151 | 126 | 178 | 200 | 209 |
| | % (N/D) | 100% | 99% | 99% | 100% | 100% |

| AAW Performance Measure QP5: Number of direct support staff for whom required training has been completed divided by number of direct support staff serving AAW participants in a given month. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| DISCOVERY DATA | | | | | | |
| <i>Numerator (N) = Direct support staff in compliance</i> <i>Denominator (D) = Direct support staff personnel files reviewed</i> Data Source: On-site record review of provider personnel data | N | 142 | 125 | 175 | 198 | 203 |
| | D | 151 | 126 | 178 | 200 | 209 |
| | % (N/D) | 94% | 99% | 98% | 99% | 97% |

IV. HEALTH AND WELFARE OF WAIVER PARTICIPANTS (HW)

CMS Assurance: On an ongoing basis the state identifies, addresses, and seeks to prevent instances of abuse, neglect, and exploitation.

| AAW Performance Measure HW1: Number of reported critical incidents where BAS approved the provider’s initial submission of the final report divided by total number of reported critical incidents. | | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
|--|---------|-----------------|-----------------|-----------------|-----------------|-----------------|
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Critical incidents where BAS approved the provider’s initial submission Denominator (D) = Critical incidents reported Data Source: HCSIS/Enterprise Incident Management | N | 47 | 67 | 71 | 70 | 134 |
| | D | 67 | 119 | 128 | 166 | 230 |
| | % (N/D) | 70% | 56% | 55% | 58% | 58% |

| AAW Performance Measure HW2: Number of reported critical incidents where a certified investigator found abuse and/or neglect divided by number of reported critical incidents where an investigation was required and finalized. | | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
|---|---------|-----------------|-----------------|-----------------|-----------------|-----------------|
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Critical incidents where abuse and/or neglect was found Denominator (D) = Critical incident reports of abuse and/or neglect investigated and finalized Data Source: HCSIS/Enterprise Incident Management | N | 2 | 3 | 5 | 16 | 10 |
| | D | 2 | 3 | 8 | 23 | 26 |
| | % (N/D) | 100% | 100% | 63% | 70% | 38% |

| AAW Performance Measure HW3: Number of participants interviewed by BAS who reported that someone hit or hurt them physically divided by number of participants BAS interviewed. | | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
|---|---------|-----------------|-----------------|-----------------|-----------------|-----------------|
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Participants who reported someone hit or hurt them physically Denominator (D) = Participants interviewed Data Source: Participant Interviews | N | 1 | 0 | 0 | 1 | 0 |
| | D | 54 | 56 | 56 | 58 | 61 |
| | % (N/D) | 2% | 0% | 0% | 2% | 0% |

| AAW Performance Measure HW4: Number of participants interviewed by BAS who reported they do not feel safe where they live divided by number of participants BAS interviewed. | | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
|---|---------|-----------------|-----------------|-----------------|-----------------|-----------------|
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Participants who do not feel safe where they live Denominator (D) = Participants interviewed Data Source: Participant Interviews | N | 0 | 0 | 0 | 1 | 2 |
| | D | 54 | 56 | 56 | 58 | 61 |
| | % (N/D) | 0% | 0% | 0% | 2% | 3% |

| | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure HW5: Number of participants interviewed by BAS who reported staff yell or scream at them divided by number of participants BAS interviewed. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Participants who reported staff yell or scream at them</i> <i>Denominator (D) = Participants interviewed</i> Data Source: Participant Interviews | N | 2 | 0 | 2 | 0 |
| | D | 54 | 56 | 56 | 58 |
| | % (N/D) | 4% | 0% | 4% | 0% |

| | | | | | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure HW6: Number of critical incident reports indicating the use of restraint, including improper or unauthorized use of restraint, divided by total number of waiver participants. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Critical incidents indicating the use of restraint</i> <i>Denominator (D) = Critical incidents reported</i> Data Source: HCSIS/Enterprise Incident Management | N | 0 | 0 | 1 | 3 |
| | D | 285 | 303 | 406 | 501 |
| | % (N/D) | 0% | 0% | .24% | .01% |

| | | | | | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure HW7: Number of critical incident reports indicating psychiatric hospitalizations divided by total number of waiver participants. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Critical incidents indicating psychiatric hospitalization</i> <i>Denominator (D) = Enrolled participants</i> Data Source: HCSIS/Enterprise Incident Management | N | 13 | 17 | 19 | 17 |
| | D | 285 | 303 | 406 | 501 |
| | % (N/D) | 5% | 6% | 5% | 3% |

| | | | | | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|
| AAW Performance Measure HW8: Number of critical incidents involving police intervention because a participant is charged with a crime or is the subject of a police investigation that may lead to criminal charges; a participant causes an event, such as pulling a fire alarm, that requires involvement of police; or a crisis intervention involving police/law enforcement personnel divided by total number of waiver participants. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 |
| DISCOVERY DATA | | | | | |
| <i>Numerator (N) = Critical incidents involving police intervention</i> <i>Denominator (D) = Enrolled participants</i> Data Source: HCSIS/Enterprise Incident Management | N | 3 | 5 | 8 | 14 |
| | D | 285 | 303 | 406 | 501 |
| | % (N/D) | 1% | 2% | 2% | 3% |

V. STATE MEDICAID AGENCY RETAINS ADMINISTRATIVE AUTHORITY OVER THE WAIVER PROGRAM (AA)

CMS Assurance: “The Medicaid Agency retains ultimate administrative authority and responsibility for the operation of the waiver program by exercising oversight of the performance of waiver functions by other state and local/regional non-state agencies (if appropriate) and contracted entities.”

| | | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| AAW Performance Measure AA1: Number of applicants who receive a functional eligibility determination within 30 days of BAS receipt of an application divided by total number of applications received by BAS. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Functional eligibility determinations in compliance Denominator (D) = Functional eligibility determinations conducted Data Source: Participant Tracking Database | N | 24 | 24 | 105 | 91 | 39 |
| | D | 34 | 39 | 133 | 114 | 43 |
| | % (N/D) | 71% | 62% | 79% | 84% | 91% |

| | | | | | | |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|------|
| AAW Performance Measure AA2: Number of initial functional eligibility determinations where BAS agrees with the decision after a review of documentation is complete divided by the number of initial functional eligibility determinations reviewed by BAS. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Initial FEAs reviewed where BAS agrees with the determination Denominator (D) = Initial FEAs determinations reviewed Data Source: Participant Tracking Database | N | 8 | 10 | 36 | 28 | 9 |
| | D | 9 | 10 | 38 | 29 | 9 |
| | % (N/D) | 89% | 100% | 95% | 97% | 100% |

VI. STATE PROVIDES FINANCIAL ACCOUNTABILITY FOR THE WAIVER (FA)

CMS Assurance: “State financial oversight exists to assure that claims are coded and paid for in accordance with the reimbursement methodology specified in the approved waiver.”

| | | | | | | |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----|
| AAW Performance Measure FA1: Number of claims for which provider documentation indicates services were provided as billed divided by total number of claims paid for a sample of participants. | FY 11-12 | FY 12-13 | FY 13-14 | FY 14-15 | FY 15-16 | |
| DISCOVERY DATA | | | | | | |
| Numerator (N) = Claims supported by documentation Denominator (D) = Services reviewed Data Source: PROMISE and on-site record review of provider files | N | 150 | 125 | 140 | 152 | 164 |
| | D | 156 | 135 | 149 | 167 | 178 |
| | % (N/D) | 96% | 93% | 94% | 91% | 92% |